

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 14
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Jews for Progress			FEC IDENTIFICATION NUMBER ▼ C C00620922		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 11 / 02 / 2016</div>					
Full Name of Payee Associated Press			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 14 / 2016</div>		
Mailing Address PO Box 414212			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">472.50</div>		
City State Zip Code Boston MA 02241-4212		Transaction ID : VSGBG9T9RT3 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 11 / 2016</div>			
Purpose of Expenditure Photograph for Newspaper Advertisement		Category/Type 004			
Name of Federal Candidate TRUMP, DONALD J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">114100.13</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee Associated Press			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 14 / 2016</div>		
Mailing Address PO Box 414212			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">472.50</div>		
City State Zip Code Boston MA 02241-4212		Transaction ID : VSGBG9TEWP7 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 11 / 2016</div>			
Purpose of Expenditure Photograph for Newspaper Advertisement		Category/Type 004			
Name of Federal Candidate Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">114100.13</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ►			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">945.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ►			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures..... ►			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Adler, Michael, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 11 / 03 / 2016</div>		

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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee Associated Press		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address PO Box 414212		Amount 175.00	
City Boston	State MA	Zip Code 02241-4212	Transaction ID : VSGBG9TFKH7
Purpose of Expenditure Photograph for Newspaper Advertisement		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		114100.13	

Full Name of Payee Associated Press		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address PO Box 414212		Amount 175.00	
City Boston	State MA	Zip Code 02241-4212	Transaction ID : VSGBG9TFKM1
Purpose of Expenditure Photograph for Newspaper Advertisement		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		114100.13	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	350.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adler, Michael, , ,

[Electronically Filed]

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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee Bluelight Strategies		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 2618.77	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TK4P7
Purpose of Expenditure Ad Placement: Heritage FL Jewish News		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		114100.13	

Full Name of Payee Bluelight Strategies		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 2618.77	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TK4R3
Purpose of Expenditure Ad Placement: Heritage FL Jewish News		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		114100.13	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5237.54
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Adler, Michael, , ,

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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee Bluelight Strategies		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 11835.15	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TK4S1 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016
Purpose of Expenditure Ad Placements: Jewish Journal, Israpost, Jacksonville Jewish, Jewish Press of Tampa & Pinellas		Category/ Type 004	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		114100.13	

Full Name of Payee Bluelight Strategies		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 11835.15	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TK4T9 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016
Purpose of Expenditure Ad Placements: Jewish Journal, Israpost, Jacksonville Jewish, Jewish Press of Tampa &		Category/ Type 004	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		114100.13	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	23670.30
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Adler, Michael, , ,

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee Bluelight Strategies		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 1176.50	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TM5R2
Purpose of Expenditure Ad Placement: Jerusalem Post	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Bluelight Strategies		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 1176.50	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TM5W4
Purpose of Expenditure Ad Placement: Jerusalem Post	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2353.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee Bluelight Strategies X *		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 58500.00	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TVNQ5
Purpose of Expenditure Online Advertising Services	Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		114100.13	

Full Name of Payee Bluelight Strategies X *		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 19500.00	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TVNS1
Purpose of Expenditure Online Advertising Services	Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		114100.13	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee Getty Images		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 75 Varick St		Amount 803.70	
City New York	State NY	Zip Code 10013-1917	Transaction ID : VSGBG9T9RG4
Purpose of Expenditure Photograph for Newspaper Advertisement		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		114100.13	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Getty Images		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 75 Varick St		Amount 803.70	
City New York	State NY	Zip Code 10013-1917	Transaction ID : VSGBG9TEWM2
Purpose of Expenditure Photograph for Newspaper Advertisement		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016
Name of Federal Candidate TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		114100.13	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1607.40
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee Getty Images		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 75 Varick St		Amount 425.65	
City New York	State NY	Zip Code 10013-1917	Transaction ID : VSGBG9TK828
Purpose of Expenditure Photograph for Newspaper Advertisement		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		114100.13	

Full Name of Payee Getty Images		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 75 Varick St		Amount 425.64	
City New York	State NY	Zip Code 10013-1917	Transaction ID : VSGBG9TK852
Purpose of Expenditure Photograph for Newspaper Advertisement		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		114100.13	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	851.29
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adler, Michael, , ,

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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee King, Jennifer, , ,		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address PO Box 59239		Amount 123.50	
City Birmingham	State AL	Zip Code 35259-9239	Transaction ID : VSGBG9TEWE6
Purpose of Expenditure Design Services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee King, Jennifer, , ,		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address PO Box 59239		Amount 123.50	
City Birmingham	State AL	Zip Code 35259-9239	Transaction ID : VSGBG9TEWF4
Purpose of Expenditure Design Services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	247.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adler, Michael, , ,

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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee King, Jennifer, , ,		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address PO Box 59239		Amount 104.50	
City Birmingham	State AL	Zip Code 35259-9239	Transaction ID : VSGBG9TF842
Purpose of Expenditure Design Services	Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee King, Jennifer, , ,		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address PO Box 59239		Amount 104.50	
City Birmingham	State AL	Zip Code 35259-9239	Transaction ID : VSGBG9TF850
Purpose of Expenditure Design Services	Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	209.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adler, Michael, , ,

[Electronically Filed]

Date

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11 / 03 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 11 OF 14
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee King, Jennifer, , , * X		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address PO Box 59239		Amount 38.00	
City Birmingham	State AL	Zip Code 35259-9239	Transaction ID : VSGBG9TSRV5
Purpose of Expenditure Design Services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		114100.13	

Full Name of Payee King, Jennifer, , , * X		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address PO Box 59239		Amount 38.00	
City Birmingham	State AL	Zip Code 35259-9239	Transaction ID : VSGBG9TVND6
Purpose of Expenditure Design Services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		114100.13	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adler, Michael, , ,

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11 / 03 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 12 OF 14
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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee King, Jennifer, , , * X		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address PO Box 59239		Amount 228.00	
City Birmingham	State AL	Zip Code 35259-9239	Transaction ID : VSGBG9TVNE4
Purpose of Expenditure Design Services	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		114100.13	

Full Name of Payee King, Jennifer, , , * X		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address PO Box 59239		Amount 266.00	
City Birmingham	State AL	Zip Code 35259-9239	Transaction ID : VSGBG9TVNM2
Purpose of Expenditure Design Services	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		114100.13	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adler, Michael, , ,

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11 / 03 / 2016

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 13 OF 14
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee Michelle LeClerc Design		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 1254 1/2 Lilac Pl		Amount 22.50	
City Los Angeles	State CA	Zip Code 90026-4419	Transaction ID : VSGBG9TF7Y4
Purpose of Expenditure Design Services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Michelle LeClerc Design		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 1254 1/2 Lilac Pl		Amount 22.50	
City Los Angeles	State CA	Zip Code 90026-4419	Transaction ID : VSGBG9TF7Z2
Purpose of Expenditure Design Services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2016	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	45.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 14 OF 14
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NAME OF COMMITTEE (In Full) Jews for Progress		FEC IDENTIFICATION NUMBER ▼ C C00620922	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2016	

Full Name of Payee National Jewish Democratic Council		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 7.30	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TEWH8
Purpose of Expenditure Shipping Services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee National Jewish Democratic Council		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 2639 Connecticut Ave NW Ste 200		Amount 7.30	
City Washington	State DC	Zip Code 20008-1594	Transaction ID : VSGBG9TEWJ6
Purpose of Expenditure Shipping Services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 114100.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	14.60
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	35530.13

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adler, Michael, , ,

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Date

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11 / 03 / 2016

Signature